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Jim Doyle, Governor Jack L. Fischer, A.I.A., Secretary

COM316 (11/99)

Quarterly Report on Employment Positions

This form (COM 316) is to comply with Section 66.1103 (4s) (b) 4 of the Wisconsin Statutes which requires that a municipality may not enter into a revenue agreement with an employer that employs individuals in this state at a site other than the project site unless the employer agrees, that if the project is expected to result in any lost jobs, to submit a report to the Department of Commerce every three months during the first year after construction of the project is completed. The reports shall provide information about new jobs, lost jobs and offers of employment made to persons who were formerly employed at the lost jobs. "Lost job" means an employment position with an employer that is eliminated at a site in this state other than a project site when the employer moves any part of its operation to a project site. The fourth report shall be the final report. Send completed form to Wisconsin Department of Commerce, Bureau of Enterprise Development, P.O. Box 7970, Madison, WI 53707

I.	Pro	pject
	A.	Employer:
		Address:
		Post Office/ZIP:
		Project Site:
		(Name of city, village or town where the project is located)
II.	Qu	arterly Report (begin the 3 rd month after the construction or the move to the project site is completed)
	A.	Date construction completed: MO DAY YR
	В.	Number of this report: 1st 2nd 3rd 4th
	C.	Date of this report: MO DAY YR
III.	Jok	b Information (since completion of construction/move to the project site or since the last report)
	A.	Have any new jobs been created at the project site? Yes No # of New Jobs:
	В.	# of Lost Jobs at other site(s): Other site(s) (location):
	C.	Were the persons formerly employed at other site(s) offered the first opportunity for the new jobs? Yes No
	D.	Are the tasks performed and the skills required of the new jobs substantially similar to the jobs at other site(s)? Yes No
	E.	Are the compensation and benefit terms for the new jobs at least as favorable as those at the other site(s)? Yes No
	F.	If "no" is answered to questions C, D, or E above, please explain why. (use additional pages if necessary)
	Sig	nature (employer/eligible participant):
	Per	rson completing this form: Phone number: